

CITY OF KIRKLAND TREE REMOVAL PERMIT APPLICATION

Permit No. _____

Before filling out this form please review the **TREE REMOVAL INFORMATION GUIDE or contact the Planning Department at 425.587.3225.**

Contact & Property Information (please write legibly)

Property Owner:

Phone:

Email:

Site Address:

Mailing Address (if different)

Contact Name:

Phone:

Email:

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the information answered on this form is true and complete to the best of my knowledge. I understand that the City of Kirkland is relying on this information to make its decision. Trees removed illegally may result in the City pursuing monetary penalties and/or restoration under KZC 95.55.

Owner Signature _____
(acknowledging and supporting request)

ARBORIST REPORT: Attach an arborist report from an individual with relevant education and training in arboriculture or urban forestry, having **two** or more of the following credentials:

- ☐ International Society of Arboriculture (ISA) Certified Arborist
- ☐ Tree Risk Assessor Certification (TRACE) as established by the Pacific Northwest Chapter of ISA
- ☐ American Society of Consulting Arborists (ASCA) registered Consulting Arborist
- ☐ Society of American Foresters (SAF) Certified Forester for Forest Management Plans

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the information answered above is true and complete to the best of my knowledge. I understand that the City of Kirkland is relying on this information to make its decision. Trees removed illegally may result in the City pursuing monetary penalties and/or restoration under KZC 95.55.

Arborist Signature_____
Arborist Credentials #1 ID & Exp Date_____
Arborist Credentials #2 ID & Exp Date

FEE: A check to the City of Kirkland for the required application fee

Attach Site Plan (use Page 3 or attach a screen shot, survey, drawing, etc.)

NOTE: The site plan must identify the approximate location of all significant trees on the property. Include location and species of trees to be removed, retained, and replaced. This form will not be processed without a completed site plan.

Tree #	Trunk Size: diameter at 4.5' (dbh)	Common Name or Genus/species	Public Tree? (yes/no)

☐ Approved
☐ Denied
Staff Initials: _____
Date: ____/____/____

--This Section for Staff Use Only--

Conditions/Comments: _____

Site Plan

Number of significant trees remaining on property after proposed removals: _____